# State of Washington Decision Package

#### **PLACEHOLDER**

### **Department of Social and Health Services**

DP Code/Title: M1-94 Mandatory Workload Adjustments

Program Level - 040 Div of Developmntl Disab

Budget Period: 2003-05 Version: 11 2003-05 Agency Request Budget

#### **Recommendation Summary Text:**

This step requests funding for the staffing requirements of caseload growth in the Medicaid Personal Care (MPC) program based on the Caseload Forecast Council (CFC) forecast.

#### **Fiscal Detail:**

Operating Expenditures	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Program 040			
001-1 General Fund - Basic Account-State	888,000	1,962,000	2,850,000
001-C General Fund - Basic Account-DSHS Medicaid Federa	544,000	1,202,000	1,746,000
Total Cost	1,432,000	3,164,000	4,596,000
Staffing	<u>FY 1</u>	FY 2	Annual Avg
D 040 F/F/F	· <del></del>		
Program 040 FTEs	18.4	42.6	30.5

# **Package Description:**

MPC is a legislatively authorized Medicaid State Plan service that provides assistance to individuals needing help with activities of daily living, such as eating, toileting, ambulation, positioning, dressing, bathing, essential shopping, meal preparation, laundry, housework, and supervision. It is an entitlement for every individual who meets the Medicaid financial and program eligibility criteria.

There is a direct relationship with the number of case managers to the number of clients who can be managed in the MPC program. Without the appropriate numbers of case managers, there is a risk that clients will not receive appropriate or cost effective services, and the safety of clients may be at risk. The use of the computer-based Comprehensive Assessment form has proven extremely valuable to measuring and monitoring the needs of Washington State's long-term-care population. These Comprehensive Assessments cannot be kept up-to-date without adequate case managers.

This step requests funding for the workload increase based on the most current CFC forecast of MPC growth for children and adults. Continued growth in MPC reflects the entitlement nature of this Medicaid State Plan service.

## **Narrative Justification and Impact Statement**

#### How contributes to strategic plan:

The Division of Developmental Disabilities (DDD) will effectively and efficiently use resources to accomplish the values, principles, and the mission of the DDD while maintaining accountability for public and client safety.

#### Performance Measure Detail

Program: 040

Cool. 02D	Decign/maintain exetem of regidential gunnerte and	Incremental Changes	
Guar. us.	D Design/maintain system of residential supports and services	<u>FY 1</u>	<u>FY 2</u>
Output	Measures		
3DA	Provide personal care services to those individuals eligible for the State Plan as forcasted by the Caseload Forecast Council	0	0

#### Reason for change:

C:\DSHSBDS\dp\_main.rpt

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Staffing demands are driven by the number of clients receiving services. The CFC is forecasting more clients will be entitled to DDD services in the MPC program.

#### Impact on clients and services:

Funding the workload change will provide sufficient staff to continue services at the current level.

Impact on other state programs:

None

Relationship to capital budget:

None

Required changes to existing RCW, WAC, contract, or plan:

None

Alternatives explored by agency:

None. The CFC forecast is the accepted method to determine workload adjustments.

#### Budget impacts in future biennia:

This request is caseload driven. The cost and number of case managers and associated staff required will carry forward into future biennia as adjusted by future caseload forecasts.

#### Distinction between one-time and ongoing costs:

This package includes one-time equipment costs. The remaining costs are ongoing.

#### Effects of non-funding:

There is a direct relationship with the number of case managers to the number of clients who can be managed in the MPC program. Without appropriate numbers of case managers, there is a risk that clients will not receive appropriate or cost effective services, and the safety of clients may be at risk. The use of the computer-based Comprehensive Assessment form has proven extremely valuable to measuring and monitoring the needs of Washington State's long term-care population. These Comprehensive Assessments cannot be kept up-to-date without adequate case managers.

#### **Expenditure Calculations and Assumptions:**

The CFC forecasts the June 2002 MPC caseload of 11,923 in Fiscal Year 2004 and 12,966 in Fiscal Year 2005. The carry forward funding level is 11,129 in Fiscal Year 2003.

Assumption: It takes 14 hours to add someone to Medicaid Personal Care. The Aging and Adult Services Administration has calculated that the initial assessment time is 14 hours with the new Interim Assessment. This is the total time for phone calls, travel, assessment, computer input, contracting, authorizations, distribution of service plans, and other intake requirements.

Assumption: It takes eight hours to do an annual review or reassessment. It is estimated to be eight hours from start to finish. While this must be conducted in-home and in-person there is time involved with phone calls, scheduling, travel, and assessment interview, but less time than initially because review and assessment information are prepared as amendments to

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the existing service plan. The clients generally have services and are not in need of new providers, different contract, arrangements, or other Department of Social and Health Services services.

Assumption: There are 1,296 hours annually available for a Case/Resource Manager FTE for case management, resource management, or intake activities. This was recorded in the Appendix H (page H-13) of the Workload Standards Study Technical Report: Case/Resource Management in DDD (March 1999).

See attachment - DDD M1-94 Mandatory Workload Adjustments.xls

Object D	<u>etail</u>		<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Prograi	n 040 Objects				
Α	Salaries And Wages		823,000	1,908,000	2,731,000
В	Employee Benefits		204,000	473,000	677,000
E	Goods And Services		306,000	555,000	861,000
G	Travel		67,000	153,000	220,000
Т	Intra-Agency Reimbursen	nents	32,000	75,000	107,000
		Total Objects	1,432,000	3,164,000	4,596,000
Program 04	urce Code Detail 0 1, General Fund - Basic A	ccount-State	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
<u>Source</u>	s <u>Title</u>				
0011	General Fund State		888,000	1,962,000	2,850,000
		Total for Fund 001-1	888,000	1,962,000	2,850,000
Fund 001- Source	-	ccount-DSHS Medicaid Federa			
19UL	Title XIX Admin (50%)		544,000	1,202,000	1,746,000
		Total for Fund 001-C	544,000	1,202,000	1,746,000
		Total Program 040	1,432,000	3,164,000	4,596,000